

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of :
Dibyapran SANYAL : Confirmation No.2969
U.S. Patent Application No. 10/827,527 : Group Art Unit: 2193
Filed: April 20, 2004 : Examiner: MICHAEL D. YAARY

For: METHOD AND APPARATUS FOR GENERATING CODE FOR SCHEDULING THE EXECUTION OF BINARY CODE

REQUEST FOR REFUND

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

A refund in the amount of \$360.00 is requested for the following reason:

- The PTO was instructed to charge Deposit Account 08-2025 for the necessary additional claims fees, not Deposit Account 07-1337. (See attached.)

Please immediately refund \$360.00 to Deposit Account No. 07-1337.

Respectfully submitted,

LOWE HAUPTMAN HAM & BERNER, LLP

/Allan M. Lowe/

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DATE: August 26, 2008

HEWLETT-PACKARD COMPANY
Intellectual Property Administration
P.O. Box 272400
Fort Collins, Colorado 80527-2400

PATENT APPLICATION

ATTORNEY DOCKET NO. 200400476-2

Inventor(s): **Dibyapran SANYAL**

Confirmation No.: **2969**

Application No.: **10/827,527**

Examiner: **MICHAEL D. YAARY**

Filing Date: **April 20, 2004**

Group Art Unit: **2193**

Title: **METHOD AND APPARATUS FOR GENERATING CODE FOR SCHEDULING THE EXECUTION OF BINARY CODE**

Mail Stop Amendment
Commissioner For Patents
PO Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Transmitted herewith is/are the following in the above-identified application:

- Response/Amendment
 New fee as calculated below
 No additional fee
 Other

- Petition to extend time to respond
 Supplemental Declaration

Fee\$

CLAIMS AS AMENDED BY OTHER THAN A SMALL ENTITY						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEES
TOTAL CLAIMS	23	MINUS	20	= 3	X \$50	\$ 150
INDEP. CLAIMS	5	MINUS	4	= 1	X \$210	\$ 210
<input type="checkbox"/> FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM						+
EXTENSION FEE	<input type="checkbox"/> 1st Month \$120	<input type="checkbox"/> 2nd Month \$460	<input type="checkbox"/> 3rd Month \$1050	<input type="checkbox"/> 4th Month \$1640		\$ 0
OTHER FEES						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 360

Charge \$ **360** to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any over payment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally charge any fees to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Dibyapran SANYAL

By: /Allan M. Lowe/

Allan M. Lowe

Attorney/Agent for Applicant(s)

Reg No. : 19641

Date : 2008-06-05

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